

POSITION	INITIALS	ID NO	DATE
FEE DETERMINATION	<i>[Signature]</i>		1/12/99
O.I.P.E. CLASSIFIER		5	1-15-99
FORMALITY REVIEW		<i>[Signature]</i>	12799

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1		✓	11-15-00
2		✓	11-15-00
3		✓	11-15-00
4		✓	11-15-00
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Claim	Final	Original	Date
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100		✓	11-15-00

Claim	Final	Original	Date
101		✓	11-15-00
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150		✓	11-15-00

If more than 150 claims or 10 actions  
staple additional sheet here

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